U21000505161

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600375886096

11/01/21--01046--013 **185.00

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 2, 2021

JESUS JOSE MENDOZA 606 3RD AVE W, APT 143 BRADENTON, FL 34205

SUBJECT: REPORTOGRAPHER LLC

Ref. Number: W21000143242

We have received your document for REPORTOGRAPHER LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tammi Cline Regulatory Specialist II Supervisor

Letter Number: 621A00026686

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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Reportographer LLC			
	sulting Florida Limit	ed Company)	
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L			
Please return all correspondence concernin	ig this matter to:		
Jesus Jose Mendoza			281 NOT 29 PH 12: 33
(Contact Person)		•	75
No Sleep Media			· 65
(Firm/Company)			. 4
606 3rd Ave W, Apt 143			
(Address)	 		7.
Bradenton, FL 34205			
(City, State and Zip Code)	·		
reportographer@gmail.com			
E-mail Address: (to be used for future annual re	eport notifications)		
For further information concerning this ma	itter, please call:		
Jesus Jose Mendoza	at (⁹¹⁵	₎ 443-5442	
(Name of Contact Person)	(Area Code)) 443-5442 (Daytime Telephone Number))
Enclosed is a check for the following amou dollars and drawn on a bank located in the	-	rocessed by this office mus	st be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$150.00 Filing Fees and Certificate of Status	□\$180,00 Filing and Certified Cop		
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO:

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of ortographer, LLC	
	(Enter Name of Other Business Entity)	MUNOV.
2. T	The "Other Business Entity" is a	• • • • • • • • • • • • • • • • • • • •
	(Enter entity type, Example: corporation, limited partnership, general partnership, common la	nw or business trust, etc.)
First	t organized, formed or incorporated under the laws of	<u>.</u> 5 U
	(Enter state, or if a non-U.S. entity, the nar	ne of the country)
0	94/17/2017	ယ
on _	(date of organization, formation or incorporation)	
3. T	The name of the Florida Limited Liability Company as set forth in the attached Article	s of Organization:
Repo	ortographer, LLC	
	(Enter Name of Florida Limited Liability Company)	
(The	f not effective on the date of filing, enter the effective date: 10/30/202] e effective date: Cannot be prior to date of receipt or filed date nor more than 90 c date this document is filed by the Florida Department of State.)	-
	i If the date inserted in this block does not meet the applicable statutory filing requirements, this date wiment's effective date on the Department of State's records.	ill not be listed as the
5. TI	he plan of conversion has been approved in accordance with all applicable statutes.	

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this	29 day of October	20 21
	of Authorized Representative of Lir	
C:	and the last	Mas
Signature o Printed Nan	f Authorized Representative: Ava	Title: Owner
		[See below for required signature(s)]
Signature:	fred Mend	Title: Charmon/Vicetheirma/Director/Owner
Printed Nan	ic: Jesus Jose Mendora	Title: Charmen/Vicethairman/Director/Owner
Signature:		
Printed Nan	ıe:	Title:
Signature: _ Printed Nan	ne.	Title:
Signature: _		Title:
Printed Nan	ne:	Title:
Signature: _		 ∑
Printed Nan	ne:	Title:
Sionature		Title:
Printed Nan	ie:	Title:
		(,)
	lorporation: `Chairman, Vice Chairman, Director, o	or Officer
	or Officers have not been selected, an I	
rem il e		W. B I
	General Partnership or Limited Liabi Tone General Partner.	ility Partnership:
•		
	imited Partnership or Limited Liabi	lity Limited Partnership:
Signatures o	of ALL General Partners.	
All others:		
Signature of	an authorized person.	
Fees:		
Arti	cles of Conversion:	\$25.00
	for Florida Articles of Organization:	
	ified Copy:	\$30.00 (Optional)
Cert	ificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Co	ompany is:	
Reportographer, LLC		
(Must contain the words "L	limited Liability Company, "L.I.,C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street addre	ss of the principal office of the Limited	d Liability Company is:
Principal Office Address:	Mailing Address:	
606 3rd Ave W, Apt 143	606 3rd Ave W, Apt 143	
Bradenton, FL 34205	Bradenton, FL 34205	
	ress of the registered agent are:	ndividual or another
	Name	
606 3rd Ave W. Ap Florida street ad	ot 143 Idress (P.O. Box <u>NOT</u> acceptable)	PH 12: 33
Bradenton	171 ³⁴²⁰⁵	
Ci	ity Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Régistered Agent & Signature (REOUIRED)

(CONTINUED)

4 .13	TTT	~1	E	IV.
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The name and address of each person authorized to manage and control the Limited Liability Company:

'AMBR" = Authorized Member	
'MGR" = Manager	Torre Torre Mondoz
MGR	Jesus Jose Mendoza 606 3rd Ave W., Apt 143 Bradenton, FL 34205
	Readenton Fl- 34205
	
	
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LE V: Other provisions, if any.	A. M.
LE V: Other provisions, if any.	
E V: Other provisions, if any. REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am award ment to the Department of State constitutes a third degree f
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu	with section 605.0203 (1) (b), Florida Statutes, I am award
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S. Jesus Jose Mendoza	with section 605.0203 (1) (b), Florida Statutes, I am award